

Tennessee Child Care Provider Annual Professional Development Plan

Personal Information (completed by staff member)

First & Last Name _____
Position _____ Date of employment _____
Facility _____ Phone _____
Licensing Date: From _____ to _____ Year _____

Highest level of education attained: circle one

GED, High School, Some College, CDA, Associate's Degree, Bachelor's Degree, Master's Degree

What is your educational goal? circle one

Improve my job skills, GED, High School, Some College, CDA, Associate's Degree, Bachelor's Degree, Master's Degree, Doctorate

Professional Survey (completed by administrator with input from staff member)

Please mark **SK** if staff person is somewhat knowledgeable, **K** if knowledgeable, or **N** if more information is needed about the following:

_____ Child Development	_____ Family Relationships	_____ Guidance
_____ Professionalism	_____ Health & Safety	_____ Individual & Cultural Diversity
_____ Learning Environments	_____ Developmentally Appropriate Practice	
_____ Administration	_____ Inclusion/special needs	_____ Observation & Assessment
_____ Language/literacy	_____ Curriculum Planning	_____ Technology

Professional Areas for Improvement/Short-term goals (completed by staff member with input from administrator)

Choose at least two areas (from the above survey or content list in guide) to complete this sentence: "This licensing year I would like to improve my knowledge and/or skills in
1. _____ and 2. _____.

Other short-term goals:

Professional Plan of Action to Improve Knowledge and/or Skills (completed by staff member with input from administrator)

How do you intend to build knowledge on each short-term goal this year? Check all that apply.

1. Workshops Professional Conferences Academic Coursework Targeted Technical Assistance
 Other (explain) _____
2. Workshops Professional Conferences Academic Coursework Targeted Technical Assistance
 Other (explain) _____

Long-term goals (completed by staff member)

Professionally, in five years ...

Needed to achieve long-term goal:

- Job security
- Advancement opportunities
- Administrative support
- Financial assistance

I would be interested in:

- Accreditation
- Administrator's Credential
- Infant/Toddler Credential
- Other: _____

Director's Signature

Date

Employee's Signature

Date